



State Historical Society of North Dakota North Dakota Museum Assessment Program 2007-09

Available on the SHSND website as a PDF file: www.nd.gov/hist

Program Guidelines

The North Dakota Museum Assessment Program provides county historical societies an opportunity to do an in-depth review of their organization, develop long-range plans, and complete a project. There are three components to this program. First, the organization conducts a self-assessment to identify its strengths and weaknesses. Second, an outside consultant is brought in to conduct an on-site assessment and to help the organization develop long-range plans. Finally, the organization uses the remainder of the program's funding to complete a specific project. Basic guidelines for eligibility are as follows:

1. Only museums organized as the official county museum in their jurisdiction may apply.
2. The museum must be organized to operate on a permanent basis for educational and historical purposes and care for historical objects and materials.
3. The museum's objects and materials must be available to the public through regular exhibits or programs in the facility that it owns and operates.
4. The museum must have at least one professional staff member or the full-time equivalent whether paid or unpaid whose responsibilities relate solely to the museum's services and operations.
5. The museum must be open on a regular basis with established hours and schedules.

Applicant Information

Applicant Organization _____

Contact Person _____

Address _____

City _____ State _____ Zip _____

Business Phone _____ Fax # _____

E-mail Address _____ Federal ID# _____

Number of full-time paid staff _____ Number of part-time paid staff _____

Number of unpaid staff / volunteers _____

What are the established hours and schedule of your museum?

Certification

The applicant hereby certifies:

- A. That to the best of the applicant's knowledge, the information contained in this application is accurate and complete.
- B. That the application has been duly endorsed by the local governing body appropriate for the applicant.
- C. That prior to any disbursement of grant funding a contractual agreement will be drafted and signed by the applicant and the State Historical Society of North Dakota, specifying detailed terms and conditions to include compliance with all federal, state and community licensing, permits, laws, and regulations.
- D. That the applicant is officially recognized as the official county museum in their jurisdiction.

Signature of Applicant _____ Date _____

Name and Title (printed) _____

General Application Instructions

Deadline:

Completed applications must be postmarked for return to the State Historical Society of North Dakota no later than August 31, 2007.

This is a competitive grant program.

Three (3) copies of the completed application materials are required.

All sections of the grant application are to be completed. Failure to address all criteria will eliminate the application from further consideration. The total score awarded to the applicant will be the combined scores of each section.

Applications are limited to no more than five (5) pages as follows:

- a one-page cover letter
- the "Applicant Information" page found on page 2 of this form
- up to three (3) additional single-sided pages to address the "Program Application Questions"

Applications are to be prepared and presented in a type-written, professional manner. A font size of no smaller than 10 pt. should be used for the entire application.

Questions regarding the North Dakota Museum Assessment Program may be directed to Chris Johnson, State Historical Society of North Dakota (701)-328-2124.

Completed applications are to be returned to:

North Dakota Museum Assessment Program
Chris Johnson, Eastern Regional Manager
State Historical Society of North Dakota
North Dakota Heritage Center
612 East Boulevard Avenue
Bismarck, ND 58505-0830

Program Application Questions

A maximum of 100 points will be awarded for the answers to the questions in the following the total of the following five sections. Please number your responses to correspond to the pertinent section being addressed.

Section 1 - Self Assessment (20 total points for this section)

The first component of this program is a self-assessment to help your organization determine its strengths and weaknesses. This self-assessment will be shared with the peer reviewer prior to his/her visit to your organization.

- a. Who from your organization will be involved in the preparation of the self-assessment?**
- b. Will your governing board or other governing entity be involved in the preparation of the self-assessment? If so, in what way will they be involved?**

Section 2 - Peer Review (20 total points for this section)

The second component of this program is an on-site assessment of your organization involving a peer reviewer. This person will work with your organization

- a. Who from your organization will be available to work with the peer reviewer during his/her on-site assessment?**
- b. What level of access will you be able to provide the peer reviewer to your organization's facilities, staff, and organizational documents?**

Section 3 - Master Planning (30 total points for this section)

The third task of this program is the development of a long-range master plan for your organization with your peer reviewer serving as a facilitator. This long-range master plan will be completed by June 30, 2009.

- a. Who from your organization will be available to participate in strategic planning sessions with the peer reviewer in order to develop the long-range master plan?**
- b. How will the development of a long-range master plan be of assistance to your organization?**
- c. Has your organization done any type of long-range planning in the past? If so, please specify the type of plans that were produced.**

Section 4 - Proposed Project (20 total points for this section)

When the long-range master plan is complete, the remaining grant funds will be used to fund a project. This project will be decided upon by the needs of your organization and the recommendations of the peer reviewer. Bear in mind that although this grant is for \$10,000, a portion of this funding will be earmarked for travel expenses of the consultant (a minimum of two trips to visit your organization) and his/ her consulting fee. The project you list in your response below will not necessarily be the project that is completed as a result of this funding.

- a. What type of project do you see as having the greatest impact for your organization?**
- b. Can this proposed project be completed by June 30, 2009?**

Section 5 - Administration and Budget (10 total points for this section)

This grant requires a match equal to at least 25% of the grant amount or \$2500. Matching funds can be in-kind or time provided by full time staff and board members at a rate of \$15 per hour.

- a. Describe in detail all sources of match, both cash funding or in-kind contributions that will be used for this grant?**